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SERIAL NUMBER 10/646,357	FILING OR 371(c) DATE 08/22/2003 RULE	CLASS 601	GROUP ART UNIT 3771	ATTORNEY DOCKET NO. E100.12.12
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/902,471 07/10/2001 PAT 6,676,614 * (*Corrected - new oath*) Data provided by applicant is not consistent with PTO records. *DO*

** FOREIGN APPLICATIONS *****

NONE DO

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
01/14/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 6	TOTAL CLAIMS 41 39	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

ADDRESS

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TITLE

AL Respiratory vest *with inflatable bladder*

FILING FEE RECEIVED 682	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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